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DATE: January 17, 2005

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Transmittal Form
Certificate of Fax Transmittal
Change of Correspondence Address (Application)

Attorney Docket No.: 21544-0001
Application No.: 10/050,981
Filed: January 18, 2002

FAX NUMBER: (717) 237-5300

PARALEGAL RESPONSIBLE: Kimberly A. Newell TELEPHONE: (717) 237-5239

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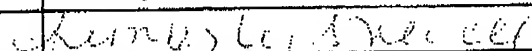
PTO/SB/21 (02-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/050,981	
	Filing Date	January 18, 2002	
	First Named Inventor	Robert J. ROBINSON	
	Art Unit	2151	
	Examiner Name	N/A	
Total Number of Pages in This Submission	4	Attorney Docket Number	21544-0001

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Fax Transmittal
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	McNees Wallace & Nurick LLC Kurt L. Ehresman, Attorney Reg. No. 56,074	
Signature		
Date	January 17, 2005	

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MCNEES WALLACE & NURICK

JAN 18 2005

003/004

PTO/SB/122 (09-03)

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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.	Application Number	10/050,981
	Filing Date	January 18, 2002
	First Named Inventor	Robert J. ROBINSON
	Art Unit	2151
	Examiner Name	N/A
	Attorney Docket Number	21544-0001

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- ☐ Assignee of record of the entire interest. Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 56,074.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name	McNees Wallace & Nurick LLC
Signature	Kurt L. Ehresman, Attorney Reg. No. 56,074
Date	January 17, 2005
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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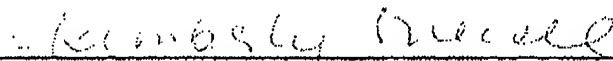
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Transmittal Form

Change of Correspondence Address - Application

Certificate of Fax Transmittal

Attorney Docket No.: 21544-0001

Application No.: 10/050,981

Filed: January 18, 2002

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